

CARBON MONOXIDE WARNING STATEMENT

Job #: _____ Date: _____ Time: _____ AM / PM

I verify that I have been informed that _____ PPM of Carbon Monoxide has been detected in the air in the living space of my house by the local Weatherization crew and that they have determined the source and informed me of the serious dangers listed below.

Client Signature: _____

Crew Member Signature: _____ Position: _____

Source: _____ Reading at Source: _____

Source: _____ Reading at Source: _____

- 9 PPM Maximum allowable concentration for continuous exposure for 24 hours in a living space (ASHRAE).
- 35-50 PPM Maximum allowable in an area for continuous exposure in an 8 hour period in a work environment.
- 60 PPM Maximum allowable for long term exposure; slow gradual degrading of overall health.
- 200 PPM Slight headache, tiredness, dizziness, and nausea after two or three hours.
- 400 PPM Frontal headaches within 1 to 2 hours; life threatening after 3 hours.
- 800 PPM Dizziness, nausea and convulsions within 45 minutes; unconsciousness within 2 hours; death within 1 hour
- 1600 PPM Headache, dizziness and nausea within 20 minutes; death within 1 hour.
- 3200 PPM Headache, dizziness and nausea within 5 to 10 minutes; death within 30 minutes.
- 6400 PPM Headache, dizziness and nausea within 1 to 10 minutes; death within 10 to 15 minutes.
- 12800 PPM Death within 1 to 3 minutes.

Corrective Actions Noted on Back of Form